## Agency Report of: Public Official Appointments

A Public Docur	ne	nt
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	Agency Name Local Agency Formation Co	mmission of Santa Clara County			California 806				
	Division, Department, or Reg					For Official Use Only			
	Designated Agency Contact	Name, Title)							
	Emmanuel Abello, LAFCO	Clerk	lerk			Date Posted:			
	Area Code/Phone Number 408/299-6415	E-mail emmanuel@abello@ceo.sccgov.org		Page 1 of	1	November 13, 2014 (Month, Day, Year)			
•	Appointments								
	Agency Boards and Commissions	Name of Appointed Person		Appt Date and Length of Term	Per Me	eting/Annual Salary/Stipend			
	Cities Service Review Technical Advisory Committee	Name LeZotte, Linda J.  (Last, First)  Alternate, if any (Last, First)		06 / 04 / 14  Appl Date  18 months  Length of Term	▶ Per Meeting:       \$ 100.06         ▶ Estimated Annual:       \$ \$0.\$1,000       \$ \$2,001.\$3,00         ☐ \$1,001.\$2,000       ☐ Other         ▶ Per Meeting:       \$ 100.06         ▶ Estimated Annual:       \$ \$0.\$1,000       ☐ \$2,001.\$3,00         ☐ \$1,001.\$2,000       ☐ Other				
	Cities Service Review Technical Advisory Committee	Kishimoto, Yoriko  Name (Lest, First)  Alternate, if any (Lest, First)	<b>}</b>	06 / 04 / 14  Appl Date  18 months  Length of Term					
		Name(Last, First)  Alternate, if any(Last, First)	-	App! Date  Length of Term	<i>▶ Estima</i>	ted Annual: 1,000			
		Name(Lost, First)  Alternate, if any(Lost, First)	-   -	Appt Date  Length of Term	▶ Estima  □ \$0-\$1	eeting: \$			
•	Verification I have read and understand FPPC Reg  Light Signature of Agency Head or Designe	ulation 18705.5. I have verified that the appointment and int  Neelima Palacherla  Print Name		n identified above is to AFCO Executiv					

## Agency Report of: Public Official Appointments

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1.	Agency Name					California 806	
	Local Agency Formation Co	ommission of Santa Clara County				Form For Official Use Only	
	Division, Department, or Reg	ion (If Applicable)				Por Official Ose Offiy	
	Designated Agency Contact	(Name,Title)					
	Emmanuel Abello, LAFCO	Clerk		······································		Date Posted:	
	Area Code/Phone Number	E-mail		Page 1 of	. 1	March 4, 2014	
	408/299-6415	emmanuel@abello@ceo.sccgov.org		rayeor		(Month, Day, Year)	
2.	Appointments						
	Agency Boards and Commissions	Name of Appointed Person		Appt Date and Length of Term	Per Me	eting/Annual Salary/Stipend	
	Finance Committee					100.00	
	rmance Committee	Name Hall, Sequoia (Lest, First)	<b>,</b> 0	02 / 05 / 14	▶ Per Me	eeting: \$100.00	
		(Ləst, First)		Appt Date	ĺ	ted Annual:	
		Alternate, if any		1 year	<b>X</b> \$0-\$1	,000	
		(Last, First)		Length of Term	\$1,00	11-\$2,000 🔲	
						Olher	
	Finance Committee				N 00 - 140	100.00	
	I mance Committee	Name Khamis, Johnny (Last, First)	<u> </u>	02 / 05 / 14 Appt Date	• Per ivie	eting: \$	
		(650), 160)		Apple Date	▶ Estimai	ted Annual:	
		Alternate, if any(Last, First)	<b> </b>	1 year	<b>X</b> \$0-\$1	,000	
		(Last, rust)		Length of Term	\$1,00	11-\$2,000	
						Other	
	Finance Committee						
	,	Abe-Koga, Margaret	•_0	02 / 05 / 14 Appt Date	▶ Per Me	eting: \$	
				4	▶ Estimat	ted Annual:	
		Alternate, if any	<b> </b>	1 year	<b>X</b> \$0-\$1	,000 \$2,001-\$3,000	
					□\$1,00	1-\$2,000 🔲	
			ļ			Other	
				, ,	▶ Per Me	eting: \$	
		Name (Lest, First)	'	Appt Date	<b>.</b>		
					▶ Estimat	ted Annual: ,000	
		Alternate, if any(Last, First)	<b> </b>	Length of Term			
					\$1,00	1-\$2,000	
<b>)</b>	Varification				anner er keind die Volkstäden keiter w		
<ol> <li>Verification</li> <li>I have read and understand FPPC Regulation 18705.5. I have verified that the appointment and information identified above is true to the best of my information.</li> </ol>							
	unalno handa	Neelima Palacheria		AFCO Executiv			
	Signature of Agency Head or Designe	e Print Name	······································	Title		(Month, Day, Year)	
	/						
	Comment:						